

**Commonwealth of Massachusetts
Center for Health Information & Analysis (CHIA)
Non-Government Agency Application for Data**

This application is to be used by all applicants, except Government Agencies, as defined in 957 CMR 5.02.

NOTE: In order for your application to be processed, you must submit the required application fee. Please consult the fee schedules for APCD and Case Mix data for the appropriate fee amount. A remittance form with instructions for submitting the application fee is available on the CHIA [website](#).

I. GENERAL INFORMATION

APPLICANT INFORMATION	
Applicant Name:	Holli Boetcher
Title:	Data Custodian
Organization:	Optum
Project Title:	Hospital Benchmarking & Analysis
Date of Application:	4-23-14
Project Objectives (240 character limit)	Optum would like to use the data for determining hospital quality for the consumer. Optum will provide consumers with hospital inpatient quality and efficiency information to help them make more informed decisions on where to seek care. A detailed data plan is attached for your review, labeled Massachusetts Optum Data Management Plan. We ask that this attachment not be posted on the internet.
Project Research Questions (if applicable)	1. 2. 3.

I. PROJECT SUMMARY

Briefly describe the purpose of your project and how you will use the requested CHIA data to accomplish your purpose.

Optum would like to use the data for determining hospital quality for the consumer. Optum will provide consumers with hospital inpatient quality and efficiency information to help them make more informed decisions on where to seek care. A detailed data plan is attached for your review. We ask that this attachment not be posted on the internet.

II. FILES REQUESTED

Please indicate the databases from which you seek data, the Level(s) and Year(s) of data sought.

ALL PAYER CLAIMS DATABASE	Level 1 ¹ or 2 ²	Single or Multiple Use	Year(s) Of Data Requested Current Yrs. Available 2009 - 2012
<input type="checkbox"/> Medical Claims	<input type="checkbox"/> Level 1 ³ <input type="checkbox"/> Level 2	Select... ▼	<input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 <input type="checkbox"/> 2012
<input type="checkbox"/> Pharmacy Claims	<input type="checkbox"/> Level 2	Select... ▼	<input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 <input type="checkbox"/> 2012
<input type="checkbox"/> Dental Claims <input type="checkbox"/> Member Eligibility <input type="checkbox"/> <input type="checkbox"/> Provider <input type="checkbox"/> Product	<input type="checkbox"/> Level 2 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 2 <input type="checkbox"/> Level 2	Select... ▼ Select... ▼ Select... ▼ Select... ▼	<input type="checkbox"/> 2009 <input type="checkbox"/> 2010 <input type="checkbox"/> 2011 <input type="checkbox"/> 2012

CASEMIX	Level 1 - 6	Fiscal Years Requested
Inpatient Discharge	<input checked="" type="checkbox"/> Level 1 – No Identifiable Data Elements <input type="checkbox"/> Level 2 – Unique Physician Number (UPN) <input type="checkbox"/> Level 3 – Unique Health Information Number (UHIN) <input type="checkbox"/> Level 4 – UHIN and UPN <input type="checkbox"/> Level 5 – Date(s) of Admission; Discharge; Significant Procedures <input type="checkbox"/> Level 6 – Date of Birth; Medical Record Number; Billing Number	<u>1998-2013 Available</u> (limited data 1989-1997) 2012
Outpatient Observation	<input type="checkbox"/> Level 1 – No Identifiable Data Elements <input type="checkbox"/> Level 2 – Unique Physician Number (UPN) <input type="checkbox"/> Level 3 – Unique Health Information Number (UHIN) <input type="checkbox"/> Level 4 – UHIN and UPN <input type="checkbox"/> Level 5 – Date(s) of Admission; Discharge; Significant Procedures <input type="checkbox"/> Level 6 – Date of Birth; Medical Record Number; Billing Number	<u>2002-2012 Available</u> (2013 available 8/1/14)
Emergency Department	<input type="checkbox"/> Level 1 – No Identifiable Data Elements <input type="checkbox"/> Level 2 – Unique Physician Number (UPN) <input type="checkbox"/> Level 3 – Unique Health Information Number (UHIN) <input type="checkbox"/> Level 4 – UHIN and UPN; Stated Reason for Visit	<u>2000-2012 Available</u> (2013 available 9/1/14)

¹ Level 1 Data: De-identified data containing information that does not identify an individual patient and with respect to which there is no reasonable basis to believe the data can be used to identify an individual patient. This data is de-identified using standards and methods required by HIPAA.

² Level 2 (and above) Data: Includes those data elements that pose a risk of re-identification of an individual patient.

³ Please note that Level 1 APCD data is not available as of 4/30/2014. This is scheduled to be available later in 2014.

	<input type="checkbox"/> Level 5 – Date(s) of Admission; Discharge; Significant Procedures <input type="checkbox"/> Level 6 – Date of Birth; Medical Record Number; Billing Number	
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III. FEE INFORMATION

Please consult the fee schedules for APCD ([Administrative Bulletin 13-11](#)) and Case Mix data ([Administrative Bulletin 13-09](#)) and select from the following options:

APCD Applicants Only

- ☐ Academic Researcher
☐ Others (Single Use)
☐ Others (Multiple Use)

Case Mix Applicants Only

- ☐ Single Use
☐ Limited Multiple Use
☒ Multiple Use

Are you requesting a fee waiver?

- ☐ Yes
☒ No

If yes, please submit a letter stating the basis for your request. Please refer to the fee schedule for qualifications for receiving a fee waiver. If you are requesting a waiver based on the financial hardship provision, please provide documentation of your financial situation. Please note that non-profit status alone isn't sufficient to qualify for a fee waiver.

IV. REQUESTED DATA ELEMENTS [APCD Only]

State and federal privacy laws limit the use of individually identifiable data to the minimum amount of data needed to accomplish a specific project objective. Please use the [APCD Data Specification Workbook](#) to identify which data elements you would like to request and attach this document to your application.

V. MEDICAID DATA [APCD Only]

Please indicate here whether you are seeking Medicaid Data:

- ☐ Yes
☐ No

Federal law (42 USC 1396a(a)7) restricts the use of individually identifiable data of Medicaid recipients to uses that are directly connected with the administration of the Medicaid program. If you are requesting Medicaid data from Level 2 or above, please describe in detail why your use of the data meets this requirement. Applications requesting Medicaid

data will be forwarded to MassHealth for a determination as to whether the proposed use of the data is directly connected to the administration of the Medicaid program. MassHealth may impose additional requirements on applicants for Medicaid data as necessary to ensure compliance with federal laws and regulations regarding Medicaid.

VI. REQUESTS PURSUANT TO 957 CMR 5.04

If you are a payer, provider, provider organization or researcher seeking access to Level 1 (de-identified) data, please describe how you will use such data for the purposes of lowering total medical expenses, coordinating care, benchmarking, quality analysis or other administrative research purposes. Please provide this information below.

We will be utilizing the data for clinical research, health services research, analyses to address public policies, and to create products and tools such as quality measurements. The reports created from these data will be used by consumers to analyze and understand hospitals where they will be seeking care. Information they will be reviewing includes length of stay, costs of stay, charge of stay, etc. The reports will focus on views of care at the DRG level for hospitals. Reports / products mentioned are sold to our customers. A data plan and samples of reporting are attached. We ask that these attachments not be posted on the internet.

VII. FILTERS

If you are requesting APCD elements from Level 2 or above, describe any filters you are requesting to use in order to limit your request to the minimum set of records necessary to complete your project. (For example, you may only need individuals whose age is less than 21, claims for hospital services only, or only claims from small group projects.)

APCD FILE	DATA ELEMENT(S) FOR WHICH FILTERS ARE REQUESTED	RANGE OF VALUES REQUESTED
Medical Claims		
Pharmacy Claims		
Dental Claims		
Membership Eligibility		
Provider		
Product		

VIII. PURPOSE AND INTENDED USE

1. Please explain why completing your project is in the public interest.

The purpose of this project is to provide consumers with hospital inpatient quality and efficiency information to assist them in making more informed decisions on where to seek hospital inpatient care. The information will be available on the web and via data files and is designed to provide the consumer with information that has the potential to improve the quality of life for Medicare and Massachusetts beneficiaries. The consumer will choose areas of interest such as the availability of certain hospital services by categories of care and user-selected conditions within each category. The consumer will have access to information such as a hospitals charges / cost, length of stay, mortality, complications, and volume. Comparison of these metrics by condition can be made among and between

different hospitals selected by the consumer. The reports will aggregate data, the limited data set file(s) requested will not be disclosed.

2. **Attach** a brief (1-2 pages) description of your research methodology. (This description will not be posted on the internet.) See attachment labeled Research and Methodology Overview
3. Has your project received approval from your organization's Institutional Review Board (IRB)? Please note that CHIA will not review your application until IRB documentation has been received (if applicable).
 - ☐ Yes, and a copy of the approval letter is attached to this application.
 - ☐ No, the IRB will review the project on _____.
 - ☐ No, this project is not subject to IRB review.
 - ☒ No, my organization does not have an IRB.

IX. APPLICANT QUALIFICATIONS

1. Describe your qualifications to perform the research described or accomplish the intended use of CHIA data.

Optum has purchased the State of Massachusetts Level I hospital discharge data for years 2004 – 2011. No significant changes are expected in the use of the data from the requested 2012 year file. Optum is experienced in dealing with health data issues and have provided hospital benchmarking and analysis for over two decades.

2. Attach résumés or curricula vitae of the applicant/principal investigator, key contributors, and of all individuals who will have access to the data. (These attachments will not be posted on the internet.) These are labeled CVs and attachments. We wish for our 'attachments' to not be posted on the internet.

X. DATA LINKAGE AND FURTHER DATA ABSTRACTION

1. Does your project require linking the CHIA Data to another dataset?
 - ☒ Yes
 - ☐ No
2. If yes, will the CHIA Data be linked to other patient level data or with aggregate data (e.g. Census data)?
 - ☐ Patient Level Data
 - ☒ Aggregate Data
3. If yes, please identify all linkages proposed and explain the reasons(s) that the linkage is necessary to accomplish the purpose of the project. Please be specific in describing which data elements will be linked to outside datasets and how this will be accomplished.

Data may be linked in aggregate to CMS Medicare data by hospital and/or diagnosis, procedure of MS DRG codes to cross-check quality results. Further, this data may be linked to CMS Provider of Services file to help identify hospital names and physical addresses. As specified in our response to #4, we do not release data where cell sizes are less than 11.

4. If yes, please identify the specific steps you will take to prevent the identification of individual patients in the linked dataset.

Optum follows the CMS mandated cell size guidelines and does not release any aggregated result (Hospital, State, CBSA) less than 11.

XI. PUBLICATION / DISSEMINATION / RE-RELEASE

1. Describe your plans to publish or otherwise disclose CHIA Data, or any data derived or extracted from such data, in any paper, report, website, statistical tabulation, seminar, conference, or other setting.

Yes, Optum will be using the data for consulting purposes. The data will be used to produce reports that are used by Health Care Professionals to analyze their inpatient charges, costs, volumes, length of stay, by comparing their facility with other facilities of their choosing.

We perform several different analyses from CMS data. The analyses at several different healthcare components. The two most common are:

- 1) Financial: How well do hospitals perform from a cost and efficiency perspective?

Financial analysis happens at:

- * the revenue code level
- * at a department level
- * at a facility wide level
- * at a peer group level (where a peer group may be an MSA, bed size, revenue or some other category)

- 2) Clinical: What are the range clinical outcomes of care, and how do these outcomes affect cost and efficiency? Clinical care happens at:

- * the DRG level
- * at the individual diagnosis code level
- * at the procedural code level
- Update of demographic, co-morbidity, length-of-stay, cost, and clinical outcome benchmarks for the key cardiovascular clinical conditions and/or procedures revolving: Acute Coronary Syndromes, Cardiac Catheterization, Cardiac Surgery, Electrophysiology, Congestive Heart Failure, Peripheral Vascular Disease, and Cerebral Vascular Disease.
- Profiling of individual facilities utilizing the above noted benchmarks.

Individual facility data will only be reported with appropriate sample size (> 11) and will only be reported in aggregate. No individual patient data will be reported.

- 3) Coding / Reimbursement:

- * The data will be used for examining coding issues relating to completeness of coding
- * Examining rates of diagnosis code usage, procedure code usage, and discharge status usage
- * Data would also be used to do comparative reimbursement modeling for clients.

We believe that our analyses benefit and further the Health Care mission because the analytics enable health care providers, hospitals and others, such as medical device companies, to better understand the components and costs of health care, and to find more efficient ways of delivering higher quality care at a reasonable cost. Benchmarking health care is an important role in helping keep health care affordable for all Americans as well.

Some clients may choose to re-release the aggregated data supplied by Optum. It should be noted that no result less than 11 is released by to clients. Example of two clients' intended uses of the data follows. (see Excel Spreadsheet examples in the attachments. We ask that these attachments not be posted to the internet.)

2. Will the results of your analysis be publicly available to any interested party? Please describe how an interested party will obtain your analysis and, if applicable, the amount of the fee.

The number of customers who purchase standard reports is relatively small, estimated at around 10 by HiQ Management and about 10 for CDS. In general the products are designed around quality measures including Quality of care, cost efficiency and volumes. A more detailed explanation of these indicators is attached to the back of the packet as Appendix 3: Ratings. (One of our attachments we do not wish to be posted on the internet.)

3. Will you use the data for consulting purposes?

- ☒ Yes
☐ No

4. Will you be selling standard report products using the data?

- ☒ Yes
☐ No

5. Will you be selling a software product using the data?

- ☐ Yes
☒ No

6. If you have answered "yes" to questions 3, 4 or 5, please describe the types of products, services or studies.

See #1 and attached samples and Addendum 3. We ask that these samples and attachments not be posted on the internet. Optum will use the data in commercial products and projects. Our customer base includes hospitals, hospital systems, consultants and medical device manufacturers. As stated above, some of these clients may re-sell the aggregate data they receive from Optum but no result < 11 is released by Optum to any commercial client.

XII. USE OF AGENTS AND/OR CONTRACTORS

Third-Party Vendors. Provide the following information for all agents and contractors who will work with the CHIA Data.

Company Name:	
Contact Person:	
Title:	
Address:	
Telephone Number:	
E-mail Address:	
Organization Website:	

7. Will the agent/contractor have access to the data at a location other than your location or in an off-site server and/or database?

- ☐ Yes
☐ No

8. Describe the tasks and products assigned to this agent or contractor for this project.